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APPLICANTS

Yongchun Lee, Rochester, NY;  
 George O. Simmons, North Greece, NY;

☒ \*\* CONTINUING DATA \*\*\*\*\*

☒ \*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
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Foreign Priority claimed <input checked="" type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NY	SHEETS DRAWING 19	TOTAL CLAIMS 8	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

ADDRESS

Milton S. Sales  
 Patent Legal Staff  
 Eastman Kodak Company  
 343 State Street  
 Rochester, NY  
 14650-2201

TITLE

Automatic image quality evaluation and correction technique for digitized and thresholded document images

FILING FEE  RECEIVED 740	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
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